

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : 10/30/521 Examiner : Smith, J GAU : 2881
From : [Signature] Location : IDC FMF FDC Date : 06-10-05
Tracking # : 06108114 Week Date : 05-23-05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> <u>CLM</u>	<u>03-12-2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Improper Dependency: Original claim 6 depends
upon canceled original claim 5. Please resolve.
[Signature]
Thank you,
[Signature]

[XRUSH] RESPONSE: Original Claim 5 is not being
Canceled
[Signature]
INITIALS: WR

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04